

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name	of the Limited Lia	bility Company	cc 110		
00/684261 Walnut Hill Holdings, Lice						
3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island						
531120 PESSON of commercial retail						
5. State of Formation Rhide Island Buildings						
6. Principal Office Address			City	State	Zip	
4218 NE 2 MAVE			MIAMI	PL	33137	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name FSSICA U	11558/51	Tom_	Contact Title General Counsel			
Street Address 218 NE 2W Ave			citymiami	Stale	^{zip} 33137	
8. List ALL managers (names a	nd addresses)	of the Limited Liab	lity Company, IF APPLICA	BLE - DO NOT LIST M	EMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<u> </u>		<u> </u>	Check the box to in	ndicate an attachment	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
Under penalty of perjury, I dec statements, and that all states	clare and affiri	n that I have exar	nined this report, includi			
Name of Authorized Person	tersen -			Date 9 - 5	Date 9 - 5 - 19	
Signature of Authorized Person	/					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

SEP 1 0 2019

FORM 832 - Readsed: 10/2017